P06000015956

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2015 APR 27 PM I2: 02
SECRETARY OF STATE
ORIDA

MAY 0 4 2014 C. CARROTHERS

COVER LETTER

TO: Amendment Section Division of Corporations	
SUBJECT: Dissolution of Corporation	
DOCUMENT NUMBER: P06000015956	
The enclosed Articles of Dissolution and fee are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
Richard M. Roman	
(Name of Contact Person)	
Stanlin Distribution Corporation	
(Firm/Company)	
2416 Stonehill Avenue	
(Address)	
Valrico, FL 33594-4701	
(City/State and Zip Code)	
For further information concerning this matter, please call:	
Richard M. Roman at (813) 376-3838	
(Name of Contact Person) (Area Code & Daytime Telephone Number)	
Enclosed is a check for the following amount:	
□ \$35 Filing Fee □ \$43.75 Filing Fee & □ \$43.75 Filing Fee & □ \$52.50 Filing Fee, Certificate of Status Certified Copy (Additional copy is enclosed) Certified Copy (Additional copy is enclosed)	
MAILING ADDRESS:STREET ADDRESS:Amendment SectionAmendment SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton Building	

2661 Executive Center Circle

Tallahassee, FL 32301

Tallahassee, FL 32314

ARTICLES OF DISSOLUTION

Pursuant to section 607.1403, Florida Statutes, this Florida profit corporation submits the following articles of dissolution:

FIRST:	The name of the corporation as currently filed with the Florida Department Stanlin Distribution Corporation	of State:	
SECOND:	The document number of the corporation (if known): P06000015956		
THIRD:	The date dissolution was authorized: 4-15-2015		
	Effective date of dissolution if applicable: 4-15-2015 (no more than 90 days after dissolution)	n file date)	2015 APR 27
FOURTH:	Adoption of Dissolution (CHECK ONE)	ETARY	_{R 27}
	Dissolution was approved by the shareholders. The number of votes cast was sufficient for approval.	forwiss TAT	P <u>내</u> 2: 02
	☐ Dissolution was approved by the shareholders through voting groups.	ē,	2
	The following statement must be separately provided for each voting group to vote separately on the plan to dissolve:	entitled	
	The number of votes cast for dissolution was sufficient for approval by		
	(voting group)		
	Signature: (By a director, president or other officer - if directors or officers have not been selected, by an incorporator - if in the hands of a receiver, trustee, or other court appointed fiduciary, by that fiduciary)		
	Richard M. Roman		
	(Typed or printed name of person signing)		
	Director		
	(Title of person signing)		

Filing Fee: \$35

Notice of Corporate Dissolution

This notice is submitted by the dissolved corporation named below for resolution of payment of unknown claims

against this corporation as provided in s. 607.1407, F.S.
This "Notice of Corporate Dissolution" is optional and is not required when filing a voluntary dissolution.
Name of Corporation: STav/ N Distribution Corporation
Date of dissolution will be the date the dissolution is filed with the Department of State or as specified in the <i>Articles of Dissolution</i> .
Description of information that must be included in a claim:
NONE
Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)
A claim against the above named corporation will be barred unless a proceeding to enforce the claim is commenced within 4 years after the filing of this notice.
Rahad M. Luna
Printed Name of the Person Filling Signature of the Person Filling

Fee: No charge if included with Articles of Dissolution. If filed separately \$35.00